

Name:		Social Security Number:			
that we verify the info	ormation you and parent(to ask you for this infor	in a process called "Verificatio (s)/spouse provided on your fina rmation before awarding Federa or financial documents, we may	ancial aid application. The land aid. If there are any different		
Information about y	our Family Members				
one, AND your childr 30, 2024 AND other p support and will conti	en, if you will provide no beople if they now live we nue to provide more that	your household. Include: yours more than half of their support frowith you, and you currently proven half of their support from July and live together include both of the	rom July 1, 2023 through June vide more than half of their y 1, 2023 through June 30, 202		
ive with your parent(sum 30, 2024, OR (b)	s) IF (a) your parents produced the children would be reconstructed.	with them, AND your parents' covide more than half of their surequired to provide parental information on the provide parents and the provide parents and the provide parents and the provide parents are the provided by the provided parents and the provided parents are the provided parents and the provided parents are the provided parents are the provided parents are the provided parents are the provided parents.	apport from July 1, 2023 throupormation when applying for		
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Student/ Spouse (if married)	UNTAXED INCOME and Additional Financial Information (REPORT 2021 ANNUAL AMOUNTS)	Parent
\$	Housing, food, and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits.)	\$
	Don't include the value of on-base military housing or the value of a basic	
	military allowance for housing.	
\$	Veterans noneducation benefits such as Disability, Death Pension, or DIC and/or VA Educational Work-Study Allowances.	\$
	Other untaxed income not reported in schedule 2 line 45, such as workers' compensation, disability benefits, etc. Also include the untaxed portions of health savings accounts from IRS Form 1040 schedule 1 line 25. Don't include extended foster care benefits, student aid, earned income credit, additional child tax credit, welfare payments, untaxed Social Security benefits, Supplemental Security Income, Workforce Innovation and Opportunity Act educational benefits, on-base military housing or a military housing allowance, combat pay, benefits from flexible spending arrangements (e.g., cafeteria plans), foreign income exclusion or credit for federal tax on special fuels.	\$
\$	Money received, or paid on your behalf (e.g. bills), not reported elsewhere on this form.	\$
\$	Earnings from work under a co-op education program offered by a college.	\$
\$	Taxable Student Grant and Scholarship aid reported to the IRS in your AGI.	\$
\$	Taxable earnings from need-based employment programs such as Federal Work Study and need based employment portions of fellowships and assistantships.	\$
\$	Amount of taxable combat pay.	\$

STUDENTS THAT ARE NOT REQUIRED TO FILE A TAX RETURN MUST COMPLETE EACH DATA REQUESTED BELOW:

Non-filers Only: List below any earned income received in 2021 and you MUST submit a copy of any W-2 forms. Check the box(es) below for those people who did not and are not required to file a 2021 Federal Tax Return.

Source of Income/Support	Student Amount	Spouse or Parent(s)	Was a W-2 Issued?				
11		Amount					
		1 11110 0111					
☐ You ☐ Your Spouse	e	Your Mother	1 Parent 2				
By signing this worksheet, I (we) certify that all the information reported on it is complete and correct. I (we) further understand that purposely giving false or misleading information regarding eligibility for Federal aid may result in fine, jail terms, or both. If Dependent, the student and at least one parent must sign and date.							
Student Signature (required	d) DATE Pa	rent/Stepparent Signature	DATE				